STATEMENT OF

RECEIVED

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FORM 1	,		ORGANIZA	2013 JUN 12 AM 9: 45 Office Use Only		
1. NAME OF COMMITTEE (in	ı full)		(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	N
GLO for Co	ngres	}			 	
		1_1_1				
ADDRESS (number a	nd street)	133 South Harbor Drive				
(Check if address is changed)						
is changed)		Venice	CITY A		FL 34285 STATE ▲	ZIP CODE A
COMMITTEE'S E-MA	AIL ADDRES	S				
(Check if address is changed)		eric@)robinsonhanks.co	om 		
			al Second E-Mail Addil di@robinsonhan			
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL)			
2. DATE 0	5 31		2013			
3. FEC IDENTIFICATION NUMBER ▶ C						
4. IS THIS STATEM	MENT 🔀	NE	W (N) OR	AMENDED (A)		
I certify that I have e	examined thi	s Stater	nent and to the best	of my knowledge and belief i	t is true, correct and comple	ete.
Type or Print Name	of Treasurer	Eric R	tobinson			
Signature of Treasure	er <i>Eric Ro</i>	obinson	In by	_	Date O. 6	1 2013
NOTE: Submission of				may subject the person signing ON SHOULD BE REPORTED \		es of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion FEC	FORM 1 sed 06/2012)